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Bib Data Sheet

CONFIRMATION NO. 7798

SERIAL NUMBER 09/902,081	FILING DATE 07/10/2001 RULE	CLASS 600	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 02581-P0392A								
<b>APPLICANTS</b> Ashwani Chhibber, Churchville, NY; George Berci, Los Angeles, CA;												
** CONTINUING DATA ***** <i>BT</i> <i>8/13/04</i>												
** FOREIGN APPLICATIONS ***** GERMANY 201 05 206.7 03/22/2001 <i>BT</i> <i>8/13/04</i>												
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/24/2001												
<table border="1"> <tr> <td>Foreign Priority claimed</td> <td><input checked="" type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td>35 USC 119 (a-d) conditions met</td> <td><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance</td> </tr> <tr> <td>Verified and Acknowledged</td> <td><i>BT</i> <i>8/13/04</i></td> </tr> <tr> <td>Examiner's Signature</td> <td>Initials</td> </tr> </table>					Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	<i>BT</i> <i>8/13/04</i>	Examiner's Signature	Initials
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Verified and Acknowledged	<i>BT</i> <i>8/13/04</i>											
Examiner's Signature	Initials											
ADDRESS 24126	STATE OR COUNTRY NY	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1								
<b>TITLE</b> Endoscopic intubation system												
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit										